



County of San Bernardino

F A S

CONTRACT TRANSMITTAL

FOR COUNTY USE ONLY

<input checked="" type="checkbox"/> New <input type="checkbox"/> Change <input type="checkbox"/> Cancel	Vendor Code	SC	Dent.	A	Contract Number
County Department District Attorney			Dept.	Orgn.	Contractor's License No.
County Department Contract Representative Jane K. Allen			Telephone 387-6613		Total Contract Amount \$985,268
Contract Type <input type="checkbox"/> Revenue <input type="checkbox"/> Encumbered <input type="checkbox"/> Unencumbered <input type="checkbox"/> Other:					
If not encumbered or revenue contract type, provide reason:					
Commodity Code		Contract Start Date	Contract End Date	Original Amount	Amendment Amount
Fund AAA	Dept. DAT	Organization DAT	Appr.	Obj/Rev Source	GRC/PROJ/JOB No. 173 Amount \$985.268
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No. Amount
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No. Amount
Project Name			Estimated Payment Total by Fiscal Year		
			FY	Amount	I/D
Workers' Compensation			04-05	\$985.268	
Fraud Program					

CONTRACTOR California Department of Insurance

Federal ID No. or Social Security No. _____

Contractor's Representative Insurance Commissioner

Address 9342 Tech Center Drive, Suite 500, Sacramento Phone (916) 854-5760

Nature of Contract: *(Briefly describe the general terms of the contract)*

Section 1872.83 of the California Insurance Code authorizes the Insurance Commissioner of the State of California to distribute funds, assessed against insurers, for the purposes of investigation and prosecution of Workers' Compensation Fraud cases.

The grant award will provide funding of approximately \$985,268 to support the program in FY 2004-05.

(Attach this transmittal to all contracts not prepared on the "Standard Contract" form.)

Approved as to Legal Form (sign in blue ink) County Counsel-Deputy Scott M. Runyan Date _____	Reviewed as to Contract Compliance Date _____	Presented to BOS for Signature Department Head-District Attorney Michael A. Ramos Date _____
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Auditor/Controller-Recorder Use Only

<input type="checkbox"/> Contract Database	<input type="checkbox"/> FAS
Input Date	Keyed By